



DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that: My residence, post office address and citizenship are as stated below next to my name: I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: LUMINESCENCE ASSISTED CARIES EXCAVATION the specification of which: [X] is attached hereto.] was filed on Application Serial No. and was amended on _____ (if applicable) I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability of this application in accordance with Title 37, Code of Federal Regulations, \$1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, \$119, of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

PRIOR FOREIGN APPLICATION(S)

Priority Claim Priority Claimed (Day/Month/Year Filed) I hereby claim the benefit under Title 35, United States Code, \$120, of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, \$112, I acknowledge the duty to disclose information material to patentability as defined in Title 37, Code of Federal Regulations, \$1.56, which occurred between the filing date of the prior application and the national or PCT Thternational filing date of this application. (Number) (Country) (Application Serial No.) (Filing Date) (Status) (patented, pending, abandoned) I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true and further that these statements were made with the knowledge that willful false statements and the like so made are funishable by fine or imprisonment, or both, under \$1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any batent issued thereon patent issued thereon. patent issued thereon.

As a named inventor, I hereby appoint John F. Hoffman, Regis. No. 26,280; Anthony Niewyk, Regis. No. 24,871; Kevin R. Erdman, Regis. No. 33,687; Michael D. Smith, Regis. No. 40,181; Michael S. Gzybowski, Regis. No. 32,816; Michael D. Schwartz, Regis, No. 44,326; Steven M. Ffanley, Regis. No. 46,756; Adam F. Cox, Regis. No. 46,644; Arthur R. Whale, Regis. No. 18,778; Michael D. Beck, Regis. No. 32,722; Deborah R. Beck, Regis. No. 37,370; Jeffrey A. Michael, Regis. No. 37,394; Eric J. Groen, Regis. No. 32,230; Gerard T. Gallagher, Regis. No. 39,679; and Robert D. Null, Regis. No. 40,746; of BAKER & DANIELS, as attorney(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. DIRECT TELEPHONE CALLS TO: SEND CORRESPONDENCE TO: JOHN F. HOFFMAN JOHN F. HOFFMAN BAKER & DANIELS 111 East Wayne Street, Suite 800 Fort Wayne, IN 46802 Telephone: 219-424-8000 Facsimile: 219-460-1700 Full name of sole or first inventor: Wolfgang Buchalla Citizenship <u>United States</u> Residence: Indianapolis, Indiana Post Office Address 702 Lockefield Court #C, Indianapolis, Indiana 46202 Inventor's Signature _____ Date __ Full name of second joint inventor: Aine M. Lennon

Residence <u>Indianapolis, Indiana</u> <u>Citizenship United States</u>

Date

Inventor's Signature _